



Food and Drug Administration
10903 New Hampshire Avenue
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Silver Spring, MD 20993-0002

April 24, 2015

SpineFrontier, Incorporated
% Mr. Kenneth C. Maxwell II
Empirical Testing Corporation
4628 Northpark Drive
Colorado Springs, Colorado 80918

Re: K150017

Trade/Device Name: SpineFrontier® SIJFuse™ Sacroiliac Joint Fusion Device System
Regulation Number: 21 CFR 888.3040
Regulation Name: Smooth or threaded metallic bone fixation fastener
Regulatory Class: Class II
Product Code: OUR
Dated: March 31, 2015
Received: April 2, 2015

Dear Mr. Maxwell:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration. Please note: CDRH does not evaluate information related to contract liability warranties. We remind you, however, that device labeling must be truthful and not misleading.

If your device is classified (see above) into either class II (Special Controls) or class III (PMA), it may be subject to additional controls. Existing major regulations affecting your device can be found in the Code of Federal Regulations, Title 21, Parts 800 to 898. In addition, FDA may publish further announcements concerning your device in the Federal Register.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Part 801); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); good manufacturing practice requirements as set

forth in the quality systems (QS) regulation (21 CFR Part 820); and if applicable, the electronic product radiation control provisions (Sections 531-542 of the Act); 21 CFR 1000-1050.

If you desire specific advice for your device on our labeling regulation (21 CFR Part 801), please contact the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

<http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to

<http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm> for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Industry and Consumer Education at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address

<http://www.fda.gov/MedicalDevices/ResourcesforYou/Industry/default.htm>.

Sincerely yours,

Lori A. Wiggins -S

for
Mark N. Melkerson
Director
Division of Orthopedic Devices
Office of Device Evaluation
Center for Devices and
Radiological Health

Enclosure

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| DEPARTMENT OF HEALTH AND HUMAN SERVICES Food and Drug Administration Indications for Use | Form Approved: OMB No. 0910-0120 Expiration Date: January 31, 2017 See PRA Statement on last page. |
| 510(k) Number <i>(if known)</i> K150017 | |
| Device Name SpineFrontier® SIJFuse™ Sacroiliac Joint Fusion Device System | |
| Indications for Use <i>(Describe)</i> The SIJFuse™ Sacroiliac Joint Fusion Device System is intended for fusion of the sacroiliac joint for conditions including sacroiliac joint disruptions and degenerative sacroilitis. | |
| Type of Use (Select one or both, as applicable) <input checked="" type="checkbox"/> Prescription Use (Part 21 CFR 801 Subpart D) <input type="checkbox"/> Over-The-Counter Use (21 CFR 801 Subpart C) | |
| PLEASE DO NOT WRITE BELOW THIS LINE – CONTINUE ON A SEPARATE PAGE IF NEEDED. | |
| FOR FDA USE ONLY | |
| Concurrence of Center for Devices and Radiological Health (CDRH) <i>(Signature)</i> | |

510(K) SUMMARY

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|----------------------------|--|
| Submitter's Name: | SpineFrontier |
| Submitter's Address: | 500 Cummings Center, Suite 3500 Beverly, MA 01915 |
| Submitter's Telephone: | 978.232.3990 x252 |
| Company Contact Person: | Manthan Damani, MSRA Senior Regulatory Affairs Associate |
| Official Contact Person: | Kenneth C Maxwell II Empirical Consulting LLC 719.291.6874 |
| Date Summary was Prepared: | 14 April 2015 |
| Trade or Proprietary Name: | SIJFuse™ Sacroiliac Joint Fusion Device System |
| Common or Usual Name: | Smooth or threaded metallic bone fixation fastener |
| Classification: | Class II per 21 CFR §888.3040 Device Classification |
| Product Code: | OUR |
| Classification Panel: | Division of Orthopedic Devices |

DESCRIPTION OF THE DEVICE SUBJECT TO PREMARKET NOTIFICATION:

The SIJFuse™ Sacroiliac Joint Fusion Device System implants consist of Solid and Fenestrated Screws. Solid and Fenestrated Screws are available in varying diameters and lengths. Solid and Fenestrated Screws are fabricated from medical grade titanium alloy (Ti-6Al-4V Eli). Solid Screws have a solid outer wall, while Fenestrated Screws have fenestrations on the outer wall. Solid and Fenestrated screws have a cannulated core. Fenestrated screws allow packing of allograft or autograft material.

INDICATIONS FOR USE

The SIJFuse™ Sacroiliac Joint Fusion Device System is intended for fusion of the sacroiliac joint for conditions including sacroiliac joint disruptions and degenerative sacroilitis.

The indications for use for the SIJFuse™ Sacroiliac Joint Fusion Device System is similar to that of the predicate devices.

TECHNOLOGICAL CHARACTERISTICS

SIJFuse™ Sacroiliac Joint Fusion Device System is made from material that conforms to ASTM F136. The subject and predicate devices have nearly identical technological characteristics and the minor differences do not raise any new issues of safety and effectiveness. Specifically the following characteristics are identical between the subject and predicates:

- Materials of manufacture
- Structural support mechanism
- Principle of operation

Table 5-1 Predicate Devices

| 510k Number | Trade or Proprietary or Model Name | Manufacturer | Predicate Type |
|--------------------|---|---------------------|-----------------------|
| K122074 | iFuse Implant System® | SI-BONE | Primary |
| K021932 | 6.5mm Cannulated Screw | Synthes | Reference |

PERFORMANCE DATA

The SIJFuse™ Sacroiliac Joint Fusion Device System has been tested in the following test modes:

- Static three-point bending per ASTM F2193
- Static axial pull out per ASTM F543
- Dynamic three-point bending per ASTM F2193

The results of this non-clinical testing show that the strength of the SIJFuse™ Sacroiliac Joint Fusion Device System is sufficient for its intended use and is substantially equivalent to legally marketed predicate devices.

CONCLUSION

The overall technology characteristics and mechanical performance data lead to the conclusion that the SIJFuse™ Sacroiliac Joint Fusion Device System is substantially equivalent to the predicate device.